

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

BACHMANN FOR CONGRESS

ADDRESS (number and street)

PO BOX 26141

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22313-6141

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00410118

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2017

through

M M / D D / Y Y Y Y  
06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

MARSTON, CHRISTOPHER, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MARSTON, CHRISTOPHER, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 14 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 18

Write or Type Committee Name  
**BACHMANN FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	7

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	12284.33	16842.20
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	12284.33	16842.20
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1717688.11	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	4826.35	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 18

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**BACHMANN FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	7

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	7

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

0.00

0.00

**(ii) Unitemized.....**

0.00

0.00

**(iii) TOTAL of contributions from individuals ▶**

0.00

0.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

0.00

0.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

5912.24

7180.37

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

5912.24

7180.37

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 18

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12284.33	16842.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	12284.33	16842.20

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1724060.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5912.24
25. SUBTOTAL (add Line 23 and Line 24).....	1729972.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12284.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1717688.11

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 18

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BACHMANN FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2017	
Mailing Address 420 MONTGOMERY ST			<b>Transaction ID : A314B8579EB2F45DCA4A</b>	
City SAN FRANCISCO	State CA	Zip Code 94104-1207	Amount of Each Receipt this Period _____ 89.77	
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item INTEREST	
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 222.62		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2017	
Mailing Address 420 MONTGOMERY ST			<b>Transaction ID : A0BBF417649C14185B99</b>	
City SAN FRANCISCO	State CA	Zip Code 94104-1207	Amount of Each Receipt this Period _____ 144.30	
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item INTEREST	
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 368.48		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2017	
Mailing Address 420 MONTGOMERY ST			<b>Transaction ID : AC32708CF14D74A55916</b>	
City SAN FRANCISCO	State CA	Zip Code 94104-1207	Amount of Each Receipt this Period _____ 1.56	
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item INTEREST	
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 368.48		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 235.63	
<b>TOTAL</b> This Period (last page this line number only).....			_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 15

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NAME OF COMMITTEE (In Full)  
**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH STREET

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1069.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 01 2017

Transaction ID : A6221E70C8CBF4F45B5C

Amount of Each Receipt this Period

1069.42

☐ Memo Item  
REVENUE SHARE INCOME

B. Full Name (Last, First, Middle Initial)  
**WELLS FARGO**

Mailing Address 420 MONTGOMERY ST

City State Zip Code  
SAN FRANCISCO CA 94104-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

222.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 28 2017

Transaction ID : A05DE82BB94BB4FDE909

Amount of Each Receipt this Period

25.83

☐ Memo Item  
INTEREST

C. Full Name (Last, First, Middle Initial)  
**MINNESOTA DEPARTMENT OF REVENUE**

Mailing Address MAIL STATION 1257

City State Zip Code  
SAINT PAUL MN 55146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 05 2017

Transaction ID : ABF839D47CEFC4E69999

Amount of Each Receipt this Period

4440.00

☐ Memo Item  
REFUND OF TAX OVERPAYMENT

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5535.25

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 18

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 15

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NAME OF COMMITTEE (In Full)  
**BACHMANN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WELLS FARGO**

Mailing Address 420 MONTGOMERY ST

City SAN FRANCISCO	State CA	Zip Code 94104-1207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 509.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2017

Transaction ID : A07A48B2F19F84E46908

Amount of Each Receipt this Period

139.65

☐ Memo Item  
INTEREST

**B.** Full Name (Last, First, Middle Initial)  
**WELLS FARGO**

Mailing Address 420 MONTGOMERY ST

City SAN FRANCISCO	State CA	Zip Code 94104-1207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 509.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2017

Transaction ID : A0120399DB6E14C0B821

Amount of Each Receipt this Period

1.71

☐ Memo Item  
INTEREST

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

141.36

5912.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address 1111 CONSTITUTION AVENUE NW

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2017

City  
WASHINGTONState  
DCZip Code  
20224-0001Purpose of Disbursement  
FEDERAL TAXES

001

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

7122.00

Transaction ID : B0CF1B0F5334140E197C

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. ASHBY LAW, PLLC**

Mailing Address 919 PRINCE STREET

Date of Disbursement

M M	D D	Y Y Y Y
05	22	2017

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LEGAL SERVICESCategory/  
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

562.50

Transaction ID : B3EE289CA55D64F8BB21

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH STREET

Date of Disbursement

M M	D D	Y Y Y Y
04	01	2017

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
WEBSITE HOSTINGCategory/  
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

277.05

Transaction ID : B2CA13A2EB6DF48479F9

☐ Memo Item

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

7961.55

**TOTAL** This Period (last page this line number only).....▶



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 18

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. ASHBY LAW, PLLC**

Mailing Address 919 PRINCE STREET

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 22 / 2017

FEC Identification Number

C

Amount of Each Disbursement this Period

75.00

Transaction ID : BBBF7840553F94071BC8

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. ASHBY LAW, PLLC**

Mailing Address 919 PRINCE STREET

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 22 / 2017

FEC Identification Number

C

Amount of Each Disbursement this Period

618.75

Transaction ID : BFF8BAD7F42F74478BE7

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVENUE, S.E.

City  
WASHINGTON

State  
DC

Zip Code  
20003-1164

Purpose of Disbursement  
DATABASE SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 03 / 2017

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B762AC866B8FB4FAE852

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

993.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B5A22655B67E44797A6C

☐ Memo Item**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : BF2F3985EEB4542FC9D8

☐ Memo Item**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

192.37

Transaction ID : BA709CA0BD360413390B

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

792.37

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVENUE, S.E.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2017

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
DATABASE SERVICES

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : BD551C11776EA4F12981

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. ASHBY LAW, PLLC**

Mailing Address 919 PRINCE STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2017

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LEGAL SERVICES

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

900.00

Transaction ID : B143414B23A7442FBB3D

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

2400.00

**TOTAL** This Period (last page this line number only).....▶

12147.67

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CARDINALS FEC COMPLIANCE SERVICES**

Nature of Debt (Purpose):

ACCOUNTING &amp; REPORTING

Mailing Address P. O. BOX 6

City

GEORGETOWN

State

TX

Zip Code

78627

Outstanding Balance Beginning This Period

195.40

Transaction ID : DAAF56A0B42BB411DAD6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

195.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**STRATEGIC FUNDRAISING**

Nature of Debt (Purpose):

TELEMARKETING

Mailing Address 2625 MOMENTUM PLACE

City

CHICAGO

State

IL

Zip Code

60689-5326

Outstanding Balance Beginning This Period

1719.00

Transaction ID : DCC4E14CAB0E945CEBC2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1719.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ASHBY LAW, PLLC**

Nature of Debt (Purpose):

LEGAL SERVICES

Mailing Address 919 PRINCE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : D9D4EDF48B2C04809A4E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

1) **SUBTOTALS** This Period This Page (optional) ▶

2214.40

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 13 OF 18

FOR LINE NUMBER:  
(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

192.37

Transaction ID : DB1BE236A0314455DABC

Amount Incurred This Period

0.00

Payment This Period

192.37

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ASHBY LAW, PLLC**

Nature of Debt (Purpose):

LEGAL SERVICES

Mailing Address 919 PRINCE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

75.00

Transaction ID : D047EBC1854584CF292E

Amount Incurred This Period

0.00

Payment This Period

75.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ROBERT WATKINS & COMPANY**

Nature of Debt (Purpose):

ACCOUNTING SERVICES

Mailing Address 610 S. BOULEVARD

City

TAMPA

State

FL

Zip Code

33606-2693

Outstanding Balance Beginning This Period

789.00

Transaction ID : D8477CA14B0D049DEAF4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

789.00

1) **SUBTOTALS** This Period This Page (optional) .....

789.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 14 OF 18

FOR LINE NUMBER:  
(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**Nature of Debt (Purpose):  
WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : DEEBBAA0DCF404881A19

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**Nature of Debt (Purpose):  
WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : D0CA292255FE844D0995

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARISTOTLE INTERNATIONAL, INC.**Nature of Debt (Purpose):  
DATABASE SERVICES

Mailing Address 205 PENNSYLVANIA AVENUE, S.E.

City

WASHINGTON

State

DC

Zip Code

20003-1164

Outstanding Balance Beginning This Period

300.00

Transaction ID : DC5BDE3991BB44C268CF

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) .....

0.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : DF3AF6F230E584630B61

Amount Incurred This Period

0.00

Payment This Period

277.05

Outstanding Balance at Close of This Period

22.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ASHBY LAW, PLLC**

Nature of Debt (Purpose):

LEGAL SERVICES

Mailing Address 919 PRINCE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

618.75

Transaction ID : DCABF725E288A48478E5

Amount Incurred This Period

0.00

Payment This Period

618.75

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : D7F19DE20C5114C71954

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

1) **SUBTOTALS** This Period This Page (optional) .....

322.95

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ARISTOTLE INTERNATIONAL, INC.**Nature of Debt (Purpose):  
DATABASE SERVICES

Mailing Address 205 PENNSYLVANIA AVENUE, S.E.

City  
WASHINGTONState  
DCZip Code  
20003-1164

Outstanding Balance Beginning This Period

1500.00

Transaction ID : DF59AC0B88E7D4B25BAA

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**CAMPAIGN SOLUTIONS**Nature of Debt (Purpose):  
WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314

Outstanding Balance Beginning This Period

300.00

Transaction ID : DFB45AE78CEC842B78B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**CAMPAIGN SOLUTIONS**Nature of Debt (Purpose):  
WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City  
ALEXANDRIAState  
VAZip Code  
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : D241EDED8A98E4F44ACB

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

1) **SUBTOTALS** This Period This Page (optional) .....

600.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ASHBY LAW, PLLC

Nature of Debt (Purpose):

LEGAL SERVICES

Mailing Address 919 PRINCE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : DC5485E0AD1DF43A7AC0

Amount Incurred This Period

900.00

Payment This Period

900.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAMPAIGN SOLUTIONS

Nature of Debt (Purpose):

WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : D90AC01777A234121846

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAMPAIGN SOLUTIONS

Nature of Debt (Purpose):

WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : D7A38207B432A44EDBCC

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

1) **SUBTOTALS** This Period This Page (optional) .....

600.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 18 OF 18

FOR LINE NUMBER:  
(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

**BACHMANN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**Nature of Debt (Purpose):  
WEBSITE HOSTING

Mailing Address 117 N. ST. ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : D56BF8BCC1DB345F0BB0

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

300.00

2) **TOTALS** This Period (last page this line number only) .....

4826.35

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

4826.35